SD BIRTH TO THREE CONTRIBUTES TO THE SUCCESS OF CHILDREN WITH DEVELOPMENTAL DELAYS AND THEIR FAMILIES BY PROVIDING DYNAMIC, INDIVIDUALIZED EARLY INTERVENTION SERVICES AND SUPPORTS BY BUILDING ON FAMILY STRENGTHS THROUGH EVERY DAY ROUTINES AND LEARNING EXPERIENCES.

South Dakota Birth to Three State Interagency Coordination Council September 11, 2019



#### STATE INTERAGENCY COORDINATING COUNCIL

#### Wednesday, September 11, 2019 | 9:30 CT Location: Drifters Conference Center Fort Pierre, SD

#### **AGENDA**

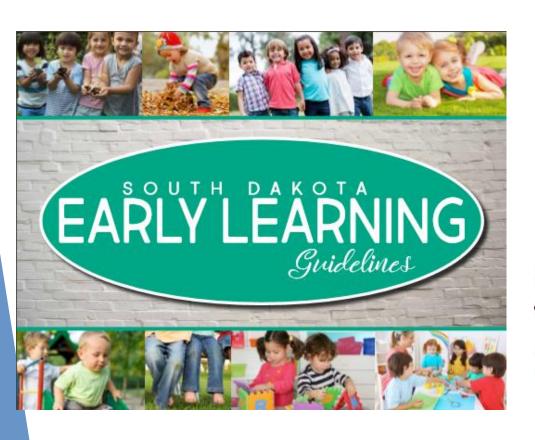
- 1. Call to Order and Roll Call
- 2. Approve Agenda
- 3. Approve April 2019 Minutes
- 4. ICC Member Introductions
- 5. Head Start Collaboration Office Updates
- 6. Public Comment
- 7. National IDEA/Part C Update Sharon Walsh, National TA Consultant
- 8. South Dakota Part C Birth to Three Year in Review
  - a. Accountability & Quality Improvement
  - b. Finance
  - c. Data System
  - d. Governance
  - e. Personnel / Workforce
- 9. Adjournment

#### **INTRODUCTIONS:**

- Please identify yourself and your representation on the board/SSIP Stakeholder group
- How many times have you moved since turning 21 or following college. In-state? Out of State?



#### South Dakota Early Learning Guidelines Birth through Kindergarten Entry





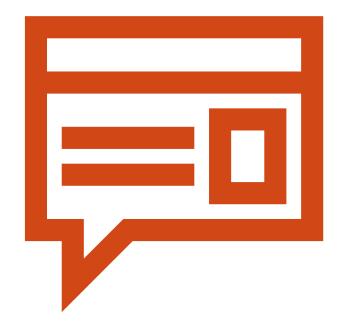
#### Next step: South Dakota Kindergarten Standards Crosswalk Head Start Standards / Early Learning Guidelines



Standard	New Standards
Educational Technology Standards* (2007)	May 2015
Standards for English Language Arts* (2010)	March 2018
Fine Arts Standards * (proposed)	May 2015
Health Education Standards* (2010)	March 2018
Standards for Mathematics* (2010)	March 2018
Physical Education Standards* (2000)	2014
Science Standards* (2005)	May 2015
Social Studies Standards* (2006)	August 2015
World Languages Standard (2011)	Proposed 2017

### Public Comment

- Share your name and what you want us to know about you and why you are here.
- Provide your public comment please keeping your remarks to 3-4 minutes.
- Each speaker should represent new idea / concern / position.
- Thank you for your participation. The ICC appreciates your comments and we will consider them as we continue our work.





### FEDERAL UPDATE

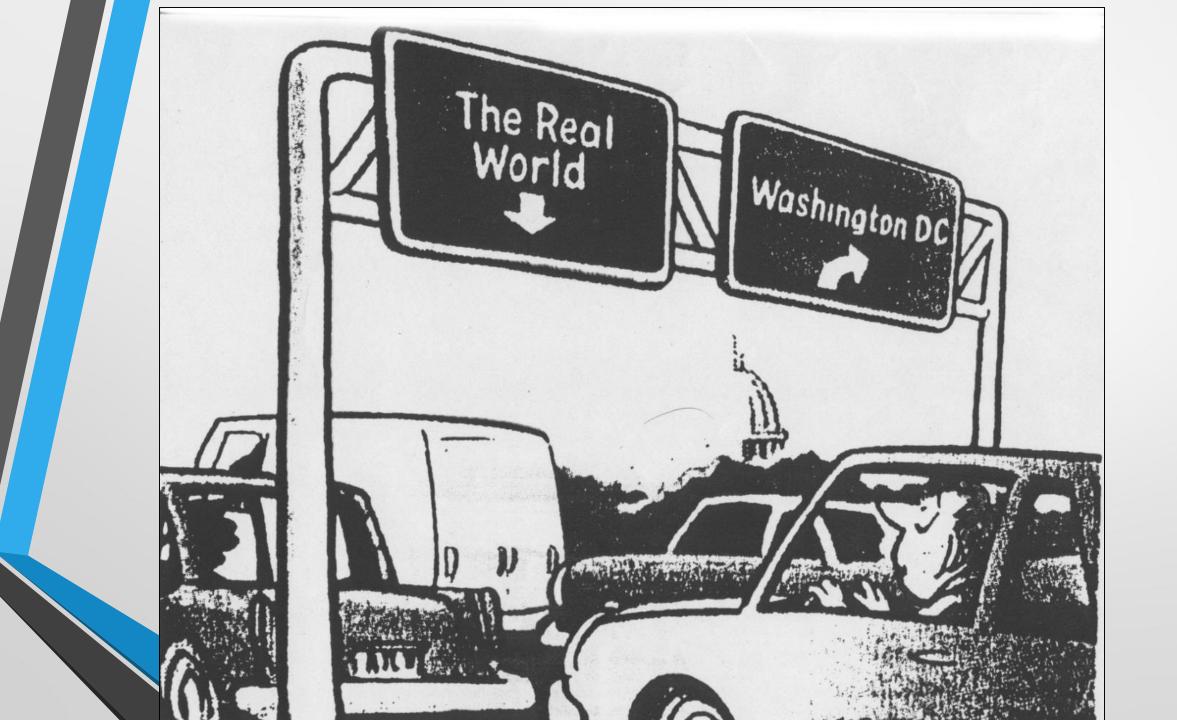
Sharon Walsh, ECTA



### **Federal Update**



South Dakota Part C ICC/Stakeholder Meeting September 11, 2019 Sharon Walsh



### Agenda



- Current Congress
- Funding
- New Early Childhood Bill
- Other Congressional Activity
- ITCA Tipping Points

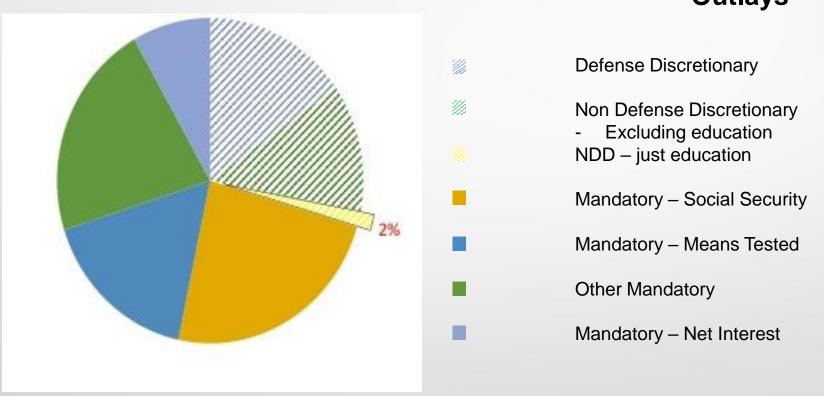
- First Session Convened January 2019
- Returned this week from 6-week recess
- Second Session January 2020
- Election November 2020

  (President, House and 1/3 Senate)
- Inauguration and 117<sup>th</sup> Congress Convenes

  January 2021

# Education - 2% of all Federal Spending Fiscal Year

Fiscal Year 2019
Outlays



Source: FY2018 OMB Budget

## AND NOW...... WHAT TO EXPECT FOR 2020 – It could BE.....





#### Where Are We Now?

# Final Funding Levels Need Agreement



- Final Funding for FFY 2020 must be in place September 30<sup>th</sup>
- May end up with a Continuing Resolution (CR) to keep the government in operation
- Unless smaller minibus bills are agreed to by all
- About 10 legislative days left before deadline
- These funds will be allocated to states under IDEA in July 2020

	FFY 2018	FFY 2019
IDEA Part C B to 3	\$470 million	\$470 million
IDEA Preschool 619	\$381.12 million	\$391.12 million
ESSA Preschool Grants Program	\$250 million	\$250 million

	FFY 2018	FFY 2019
Child Care Block Grant	\$5.25 billion	\$5.30 billion
Head Start	\$9.90 billion	\$10.10 billion
Maternal and Child Health Block Grant (MCH)	\$651.7 million	\$677.7 million

### Proposed House Education Increases

- Title I ESSA is increased by \$1 billion to \$16.9 billion
- IDEA Part B 611 is increased by \$1 billion to \$13.4 billion
- Special Olympics education programs is increased by \$3.5 million to \$21 million
- Part C of IDEA is increased by \$21 million to \$491 million
- 619 Preschool is increased by \$12 million to \$403 million
- Title II of ESSA is increased by \$500 million to \$2.6 billion
- 21st Century Community Learning Centers would be increased to \$1.3 billion

### Proposed Health and Human Services (HHS) Increases

- \$705 million for **Title V MCH Block Grant** (a \$27.3 million increase)
- \$130.5 million for **Healthy Start**: (a \$8 million increase)
- \$7.676 billion for CCDBG (a \$2.4 billion increase)
- \$11.563 billion for **Head Start** (a \$1.5 billion increase)
- \$350 million for **PDGs** (a \$100 million increase)
- \$41.6 million for University Centers or Excellence in Developmental Disabilities (UCEDs) (a \$1 million increase)

### IDEA Full Funding Act Introduced

- Senator Chris Van Hollen (D-MD) original sponsor introduced the IDEA Full Funding Act, S. 866 – March 3, 2019. (bipartisan, bicameral bill)
- Representative Jared Huffman (D-CA) original sponsor introduced the IDEA
   Full Funding Act H.R. 1878 March 26, 2019. (bipartisan, bicameral bill)
- Provides mandatory funding that puts federal government on a 10-year glide path to reach the 40% of the additional costs associated with educating students with disabilities.
- Currently, the federal government funding is at approximately 16% of those additional costs.
- Supports Part B 611 increases only Part B 619 –
   Preschool, Part C and Part D are not included in the bill.

## Exciting News! New Bill! Context and Background

- Part C and Preschool 619 Programs serve over 1.16 million children, about double the number served in 1991.
- Part C serves over 720,000 children in full year cumulative count – about double the single day count
- Federal funding has not kept pace resulted in continuing decrease in federal per child funding (<u>Part C \$650 per child</u>; 619 \$506 per child)
- Resulting in increased fiscal burden on state and local budgets

### HR 4107 "Funding Early Childhood is the Right IDEA Act"

- Establishes glide path of increasing authorization levels for IDEA Part C and Part B 619 Preschool
- Amounts are based on restoring the highest per child funding levels with inflation considered
- The bill is parallel to the Part B Full Funding Act efforts
- Mark DeSaulnier (CA-D) introduced the House bill
- Discussions are occurring to secure co-sponsors in House
- Discussions are occurring to secure sponsors in Senate

#### "Child Care for Working Families Act" Reintroduced in March 2019

- Senator Patty Murray (WA-D) S 568 (34 co-sponsors)
- https://www.congress.gov/bill/116th-congress/senatebill/568/text?q=%7B%22search%22%3A%5B%22congressId%3A116+AN D+billStatus%3A%5C%22Introduced%5C%22%22%5D%7D&r=5
- Representative Bobby Scott (VA-D) H.R. 1364 (151 co-sponsors)
- <a href="https://www.congress.gov/bill/116th-congress/house-bill/1364/text?r=1&s=4">https://www.congress.gov/bill/116th-congress/house-bill/1364/text?r=1&s=4</a>

#### Outline of the Bill

- Title I Child Care and Development Assistance
- Title II High Quality Preschool
- Title III Head Start Expanded Duration
- Title IV Appropriations for Supports and Services for Inclusive Child Care for Infants, Toddlers, and Children with Disabilities – Part C and Preschool 619
- Title V Maternal, Infant, and Early Childhood Home Visiting Program

Needs Strong Bipartisan Support

## Child Care and Development Block Grant (CCDBG)

- Historic increases in funds in FFY 2018 and FFY 2019
- Provides funds to states to assist low-income families to afford child care, to help ensure the health and safety of child care, and to invest in improving the quality of care.
- States are using the funds to increase payment rates, serve families on the waiting list for assistance, and implement the new requirements of the 2014 CCDBG reauthorization law.
- National Women's Law Center released in January 2019 a report on how specific states were using these increases (updated information is being gathered)
- <a href="https://nwlc.org/resources/states-use-new-child-care-development-block-grant-funds-help-children-families/">https://nwlc.org/resources/states-use-new-child-care-development-block-grant-funds-help-children-families/</a>

## B-5 Preschool Development Grants

- 24
- Enacted under ESSA.
- Currently awarded to 46 states/territories with awards range between \$538,000 and \$10,620,000.
- Coordinated by ACF/HHS and Department of Education.
- Grants fund states to conduct comprehensive statewide needs assessment followed by in-depth strategic planning for enhanced community services.
- Grant period is through December 30, 2019.
- Opportunity to apply for renewal grants for next year.
- FFY 2020 final funding level will impact number of continuations

## In Case you Were Wondering....Will We Reauthorize IDEA Soon?









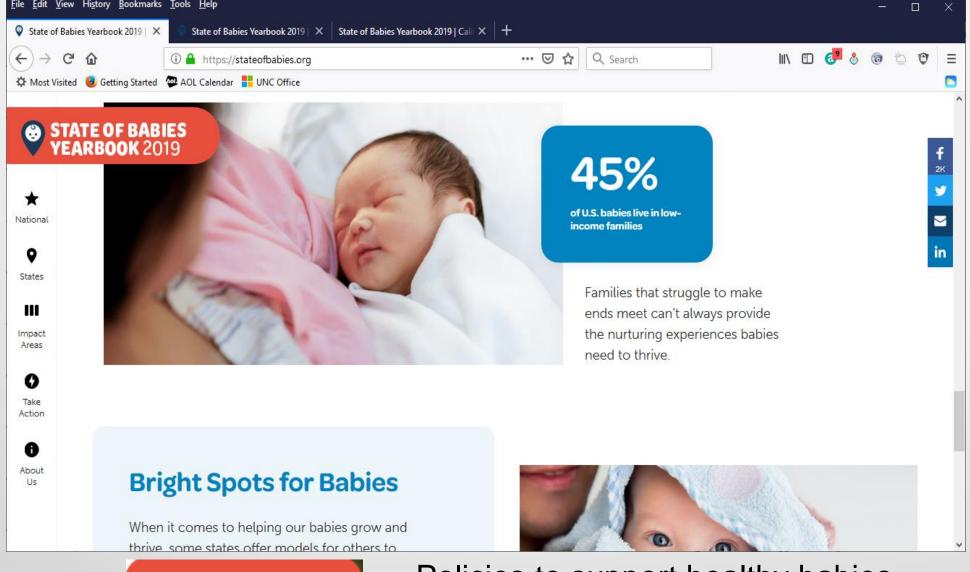
- Head Start Act
- Education Sciences Reform Act
- Higher Education Act

#### What's Else Is Planned?

- Autism Cares 2019
- CAPTA
- Paid Family Leave
- Rise from TRAUMA Act
- Keeping All Students Safe Act
- Tax Reform
- Health Care and Medicaid
- Immigration
- Others

#### State of Babies Annual Yearbook

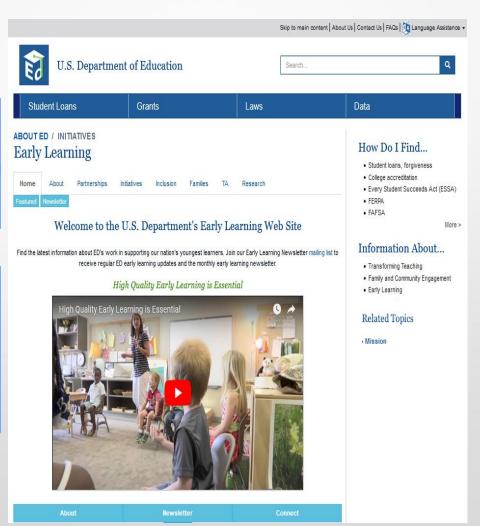
- ZERO TO THREE and Child Trends sponsored
- State-by-state story of America's babies
- Provides policymakers and advocates information to advance national and state policies to improve the lives of infants and toddlers.
- https://www.zerotothree.org/resources/2647-state-of-babies-yearbook2019?utm\_term=Sign%20Up&utm\_campaign=EOY2018&utm\_con
  tent=email&utm\_source=Act-On&utm\_medium=Email%20%20EOY%20E6&cm\_mmc=Act-On%20Software-\_-email-\_Coming%20Soon%3A%20State%20of%20Babies%20Yearbook%3
  A%202019-\_-Sign%20Up



51% of babies in the U.S. are children of color Policies to support healthy babies should embrace the changing demographics of our country.

# U.S. Department of Education Early Learning

- Dept of Education's Early Learning Web Page.
- https://www2.ed.gov/about/inits/ed/earlylear ning/index.html
- Monthly email newsletter available – you can subscribe at the bottom of web page

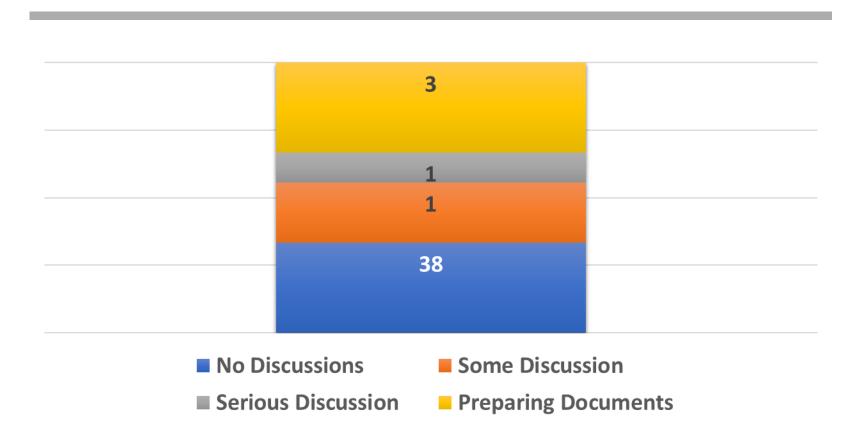




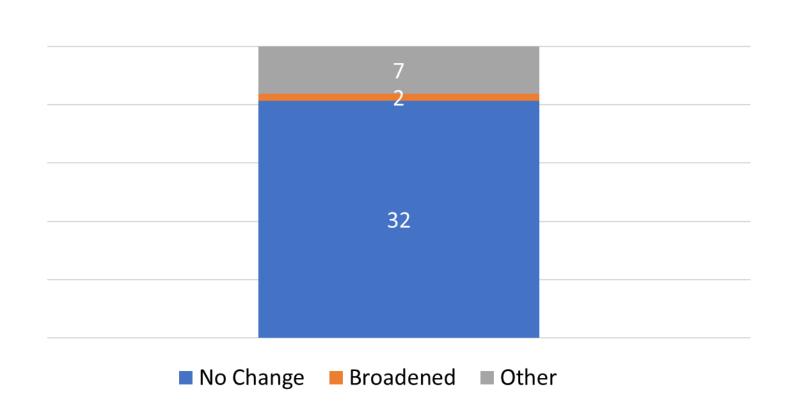


ITCA 2019 Tipping Points Survey

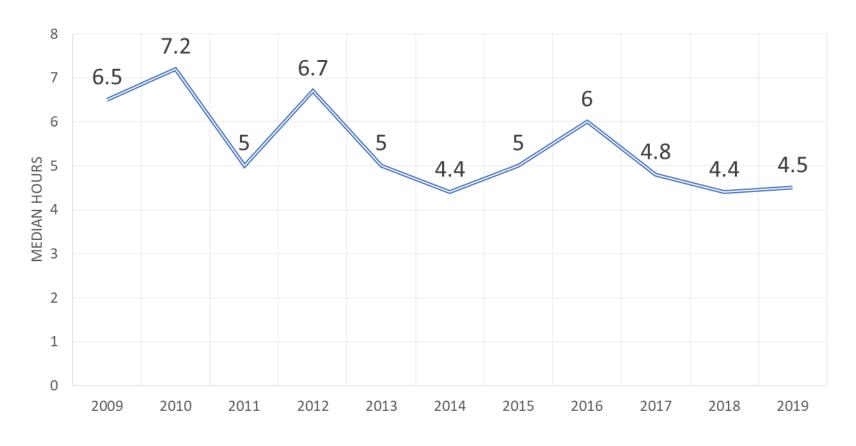
# Good News for Continued Participation (n=45)



### Status of Eligibility (n=43)



#### Planned Service Hours Per Child Per Month (n=21)



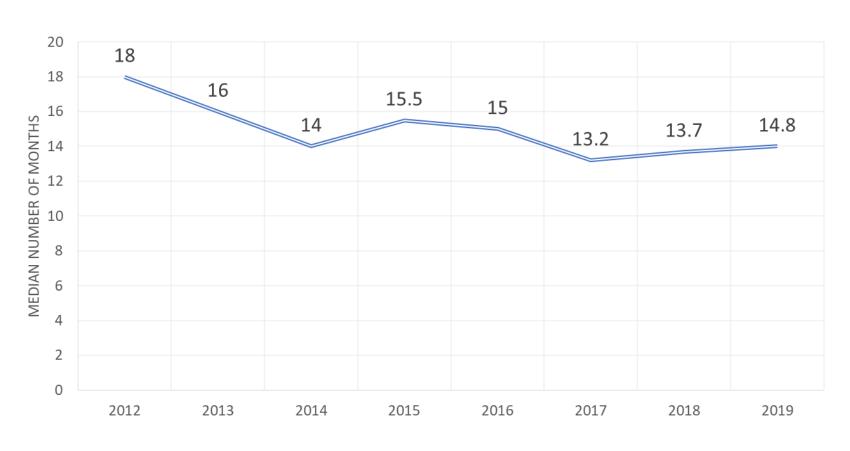
Range: 1.5 hours to 18 hours

#### Delivered Service Hours Per Child Per Month (n=15)



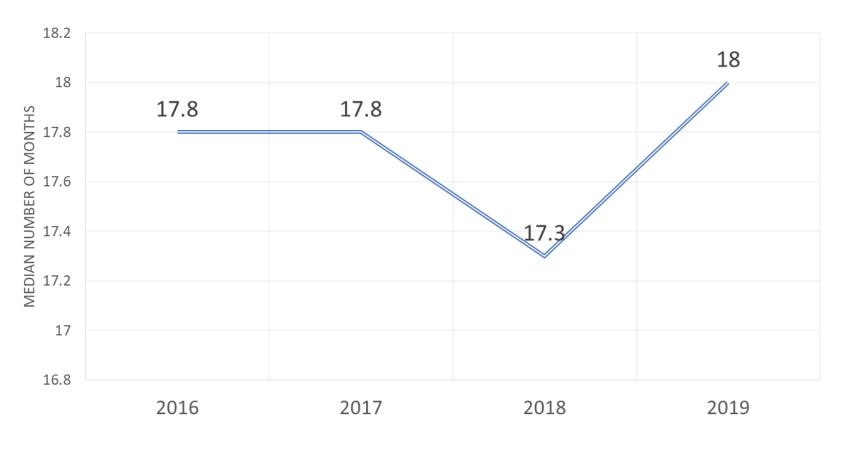
Range: 2 hours to 16 hours

#### Length of Stay in Part C (n=29)



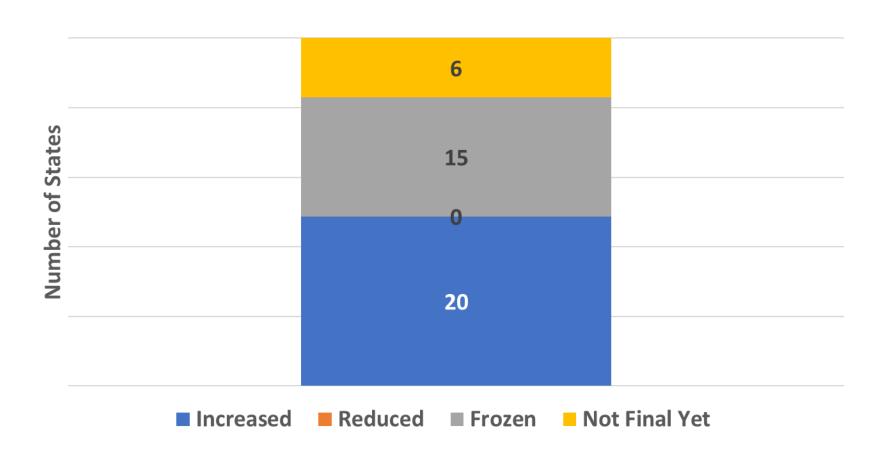
Range: 6 months to 19 months

#### Average Age at Referral (n=30)

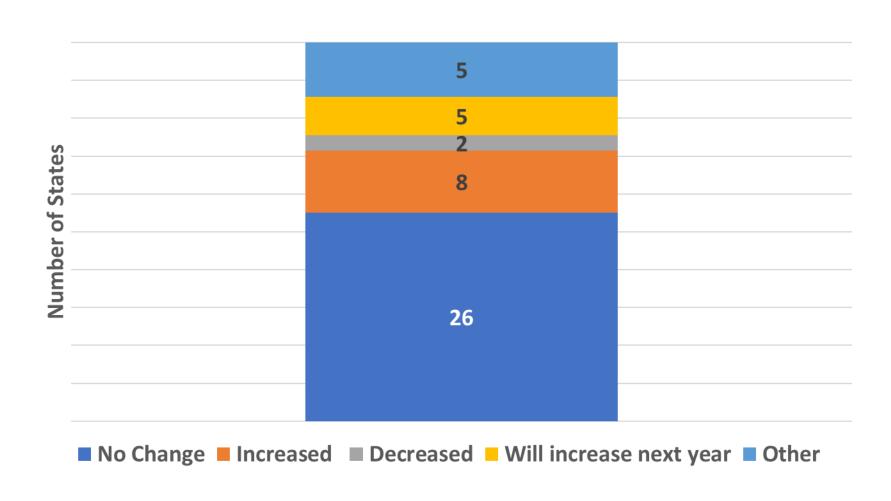


Range: 2 months to 27 months

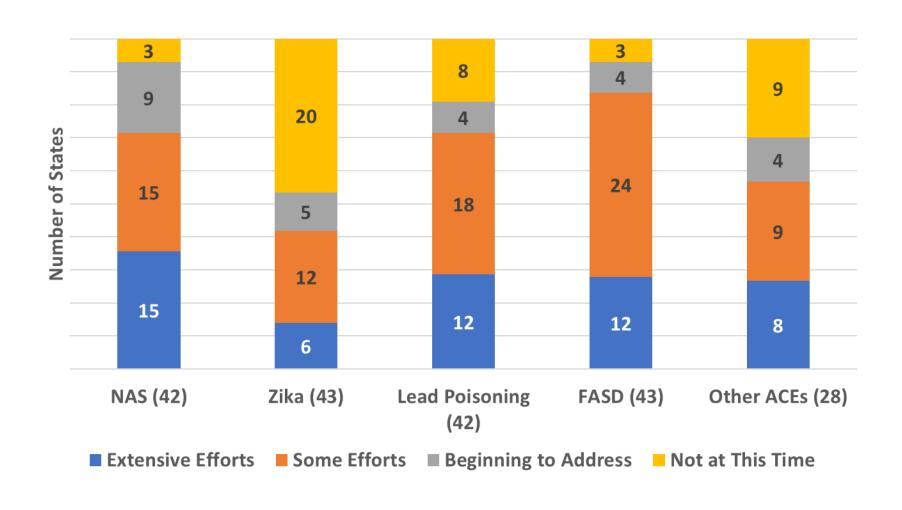
#### State Funding Status (n=41)



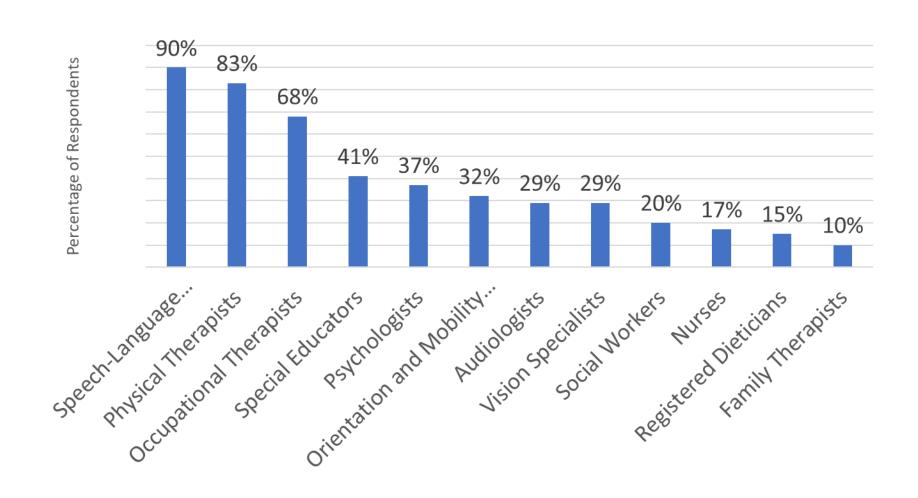
#### Provider Reimbursement (n=49)



#### Addressing Special Populations



#### 2019 Provider Shortages (n=42)



### Thank you!



# SOUTH DAKOTA PART C



# It's time to rethink how we're serving students with disabilities and their families





## WHAT IS THE SSIP?

Multi-year, achievable plan that:

- \*Increases capacity of EIS programs to implement, scale up, and sustain evidence-based practices
- \*Improves outcomes for children with disabilities (and their families)







# OSEP DIRECTION TO DEVELOP A SYSTEM FRAMEWORK TO GUIDE STATES IN THEIR SSIP DEVELOPMENT

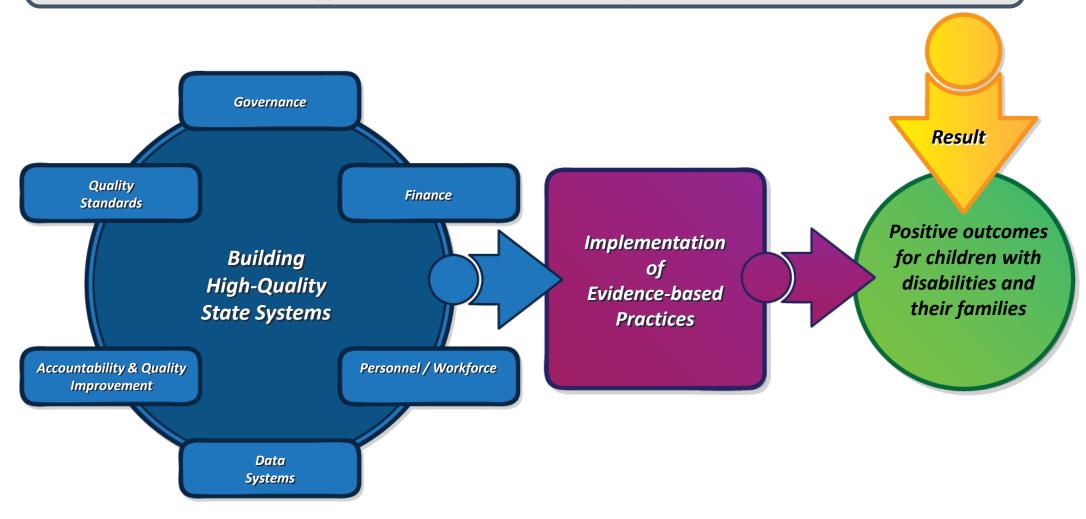
Purpose: to guide states in <u>evaluating</u> their current Part C/619 system, <u>identifying</u> areas for improvement, and <u>providing direction</u> on how to develop a more effective, efficient Part C and Section 619 system.

Audience: the key audience is state <u>Part C and state Section 619</u> coordinators and staff, with acknowledgement that other key staff and leadership in a state will need to be involved.

**Development**: developed <u>collaboratively</u> with the field (state teams, TA partners, and national experts) through a 2-year <u>iterative</u> process.



## What infrastructure must be in place to support implementation of effective evidence-based practices?



#### Phase III SSIP

#### Improvement Plan

- Implement activities as planned
- Monitor Implementation and make revisions based on data
- Document progress and outcomes.
- Engage stakeholders

#### **Evaluation Plan**

- Conduct evaluation activities
- Track progress toward achievment of the outcomes and the SIMR targets
- Prepare summaries of evaluation data for planning teams
- Engage stakeholders

#### Phase II SSIP Improvement Plan

#### **Improvement Plan**

- Implement coherent improvement strategies: Goals, activities, steps with timelines, resources and who's responsible to improve insfrastructure and support locals in implementing evidence-based practices
- Align, partner & leverage existing multiple offices, initiatives and other resources

#### **Evaluation Plan**

- Evaluation aligned to TOA
- Short- and long-term outcomes aligned to Implementation Plan
- Data collection/analysis methods & timelines to measure implementation (process) & outcomes (impact)
- Stakeholder engagement and communication

#### **Theory of Action**



State-Indentified Measureable Child and/or Family Result

In-Depth Data Analysis

In-Depth Infrastructure Assessment

Primary Concern(s) / Focus(es)

**Broad Data Analysis** 

**Broad Infrastructure Assessment** 

Getting Started / Preparation

# How did we get there?





#### SSIP Theory of Action

Strands of Action	If the State	Then regionally	Then	Results
Data Quality	establishes a process to obtain and report exit BDI scores for children exiting the Birth to Three programs regardless of reasons for exit Provides BDI-2 training in collaboration with 619 to evaluators	service coordinators/districts will increase the number of usable BDI-2 exit evaluationsevaluators will improve the reliability and validity of BDI-2 administration		
Accountability	develops and implements a monitoring protocol to identify appropriate IFSP decisions and the use of appropriate recommended EI practices	IFSP teams will increase evidence-based service decisions	statewide data quality will increase children and families will receive	infants and toddlers exiting early intervention services
Professional Development	provides support and TA to all partners to increase their active participation in the SSIP processdesigns and implements training/TA to increase knowledge and skills and use of appropriate recommended EI practices	Birth to Three partners will increase active involvement in SSIP process including analyzing data and making data informed decisionsproviders will increase use of recommended practices	appropriate evidence based practiceparents and caregivers will be engaged in child's routine based intervention	will demonstrate increased growth in their acquisition and use of knowledge and skills (including early language / communication)
Recommended Practices	presents a consistent statewide message about early intervention service delivery and evidence based practice provides training and resources on appropriate use of family assessment and embedded routines	service coordinators and providers will implement and cultivate family and caregiver engagement and coaching practices		

### South Dakota Stakeholder Theory of Action





## FOUR CATEGORIES OF DETERMINATION

- 1. Meets the requirements and Purpose of IDEA (28)
- 2. Needs Assistance in implementing the requirements of IDEA (29)
- 3. Needs intervention in implementing the requirements of IDEA (0)
- 4. Needs substantial intervention in implementing the requirements of IDEA (0)





LET'S LOOK AT SD-C DETERMINATION 2019

South Dakota Part C Meets Requirements!!



## South Dakota 2019 Part C Results-Driven Accountability Matrix

#### Results-Driven Accountability Percentage and Determination<sup>1</sup>

Percentage (%)	Determination	
81.25	Meets Requirements	

#### **Results and Compliance Overall Scoring**

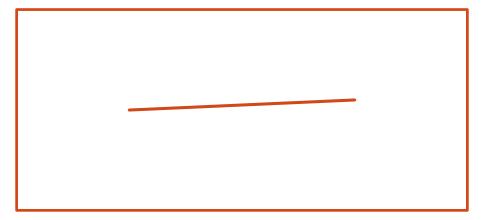
	Total Points Available	Points Earned	Score (%)
Results	8	5	62.5
Compliance	14	14	100



#### Compliance



#### Child Outcomes





#### 2019 Part C Compliance Matrix

Part C Compliance Indicator <sup>1</sup>	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2016	Score
Indicator 1: Timely service provision	100	N/A	2
Indicator 7: 45-day timeline	100	N/A	2
Indicator 8A: Timely transition plan	100	N/A	2
Indicator 8B: Transition notification	100	N/A	2
Indicator 8C: Timely transition conference	100	N/A	2
Timely and Accurate State-Reported Data	100		2
<b>Timely State Complaint Decisions</b>	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
Longstanding Noncompliance			2
Special Conditions	None		
Uncorrected identified noncompliance	None		



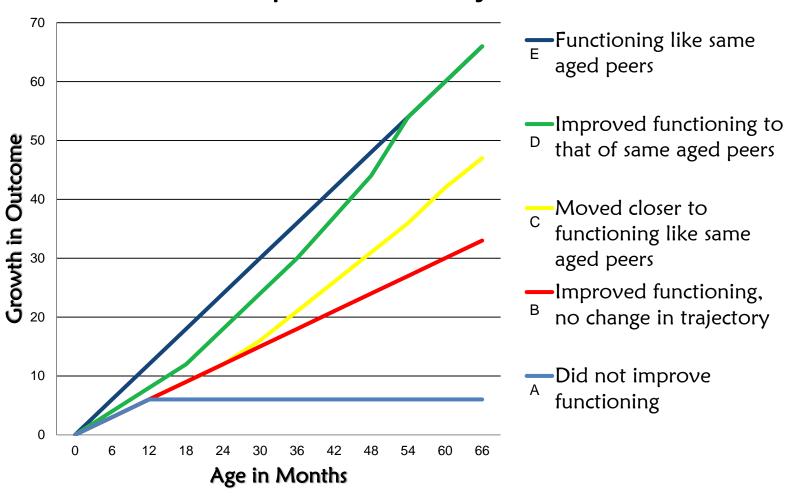
#### (a) Data Completeness: The percent of children included in your State's 2017 Outcomes Data (Indicator C3)

Number of Children Reported in Indicator C3 (i.e. outcome data)	657
Number of Children Reported Exiting in 618 Data (i.e. 618 exiting data)	1041
Percentage of Children Exiting who are Included in Outcome Data (%)	63.11
Data Completeness Score <sup>2</sup>	1

Data Completeness Score	Percent of Part C Children included in Outcomes Data (C3) and 618 Data	
0	Lower than 34%	
1	34% through 64%	
2	65% and above	



#### **Developmental Trajectories**





	Social Emoti	ional Skills	Acquiring Knowled	dge and	Action	propriate to Meet eds
	Enter#of	% of	Enter # of	% of	Enter # of	% of
	Children	Children	Children	Children	Children	Children
a. Children who did not improve functioning						
	3	0.5%	1	0.2%	0	0.0%
b. Children who improved functioning but not sufficient to move nearer to						
functioning comparable to same age peers	119	18.1%	113	17.2%	20	3.0%
c. Children who improved functioning to a level nearer to same-aged peers but						
did not reach it	5	0.8%	142	21.6%	89	13.5%
d. Children who improved functioning to reach a level comparable to same-						
aged peers	129	19.6%	218	33.2%	185	28.2%
e. Children who maintained functioning at a level comparable to same-aged						
peers	401	61.0%	183	27.9%	363	55.3%
TOTAL	657	100.0%	657	100.0%	657	100.0%
SUMMARY STATEMENTS						
1. Of those children who entered the program below age expectations in [outco	me], the					
percent that substantially increased their rate of growth in [outcome] by the time they exited.				75.9%		93.2%
2. Percent of children who were functioning within age expectations in						
[outcome], by the time they exited.				61.0%		83.4%

• 
$$SS2 = (D + E) / (A + B + C + D + E)$$



Number of Infants and	Toddlers with	IFSP's
runner of minutes and	roudicio min	
Assessed in your State		

657

Outcome A — Positive Social Relationships	Category a	Category b	Category c	Category d	Category e
State Performance	3	119	5	129	401
Performance (%)	0.46	18.11	0.76	19.63	61.04
Scores	1	1	1	1	0

Outcome B — Knowledge and Skills	Category a	Category b	Category c	Category d	Category e
State Performance	1	113	142	218	183
Performance (%)	0.15	17.2	21.61	33.18	27.85
Scores	1	1	1	1	1

Outcome C — Actions to Meet Needs	Category a	Category b	Category c	Category d	Category e
State Performance	o	20	89	185	363
Performance (%)	О	3.04	13.55	28.16	55.25
Scores	1	0	1	1	0

	Total Score
Outcome A	4
Outcome B	5
Outcome C	3
Outcomes A-C	12

Data Anomalies Score	Total Points Received in All Progress Areas
0	0 through 9 points
1	10 through 12 points
2	13 through 15 points

Data Anomalies Score	1
----------------------	---

#### Scoring Percentages for the 10th and 90th Percentile for Each Outcome and Summary Statement, FFY 2017

Percentiles	Outcome A SS1	Outcome A SS2	Outcome B SS1	Outcome B SS2	Outcome C SS1	Outcome C SS2
10	46.92%	41.66%	54.45%	33.58%	57.09%	40.71%
90	84.38%	70.99%	84.75%	60.97%	87.99%	75.62%

#### Your State's Summary Statement Performance FFY 2017

Summary Statement (SS)		Outcome A: Positive Social Relationships SS2	Outcome B: Knowledge and Skills SS1	Outcome B: Knowledge and Skills SS2	Outcome C: Actions to meet needs SS1	Outcome C: Actions to meet needs SS2
Performance (%)	52.34	80.67	75.95	61.04	93.2	83.41
Points	1	2	1	2	2	2

Data Comparison Score	Total Points Received Across SS1 and SS2	
0	0 through 4 points	
1	5 through 8 points	
2	9 through 12 points	

Total Points Across SS1 and SS2(*)	10
Your State's Data Comparison Score	2



#### Comparing your State's FFY 2017 data to your State's FFY 2016 data

Summary Statement/ Child Outcome	FFY 2016 N	FFY 2016 Summary Statement (%)	FFY 2017 N	FFY 2017 Summary Statement (%)	Difference between Percentages (%)	Std Error	z value	p-value	p<=.05	Score: 0 = significant decrease 1 = no significant change 2 = significant increase
SS1/Outcome A: Positive Social Relationships	265	51.32	256	52.34	1.02	0.0438	0.2336	0.8153	No	1
SS1/Outcome B: Knowledge and Skills	508	73.43	474	75.95	2.52	0.0277	0.91	0.3628	No	1
SS1/Outcome C: Actions to meet needs	303	88.78	294	93.2	4.42	0.0233	1.8936	0.0583	No	1
SS2/Outcome A: Positive Social Relationships	692	79.62	657	80.67	1.05	0.0217	0.4813	0.6303	No	1
SS2/Outcome B: Knowledge and Skills	692	59.54	657	61.04	1.5	0.0266	0.5619	0.5742	No	1
SS2/Outcome C: Actions to meet needs	692	82.95	657	83.41	0.46	0.0204	0.2265	0.8208	No	1

Total Points Across SS1 and SS2	6
---------------------------------	---

Indicator 2 Overall Performance Change Score	Cut Points for Change Over Time in Summary Statements Total Score
0	Lowest score through 3
1	4 through 7
2	8 through highest

Your State's Performance Change Score	1
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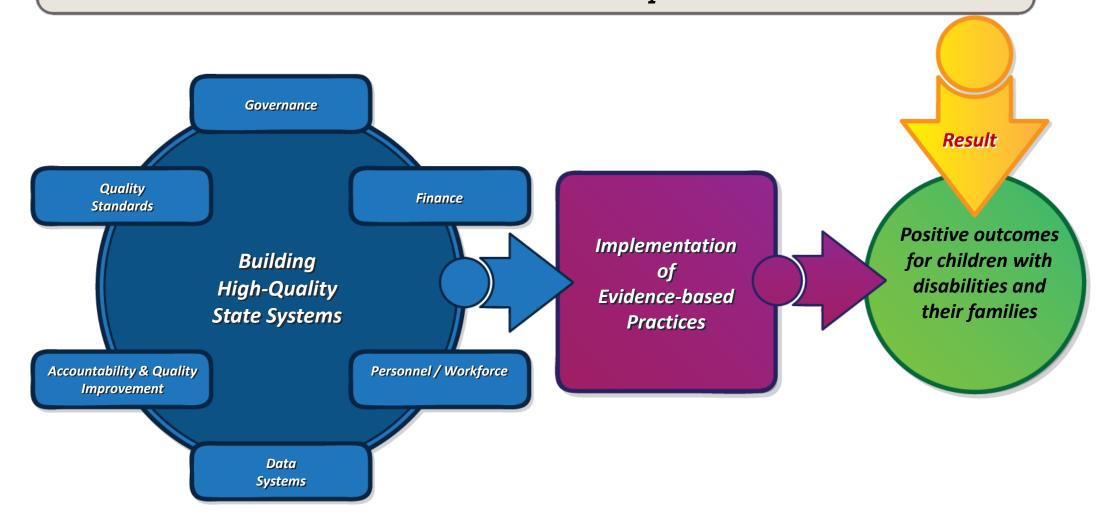
\*\*To honor our guest speaker who will be joining us virtually we will begin right at 12:30. Thank you.

### WELCOME BACK!!





## What infrastructure must be in place to support implementation of effective evidence-based practices?

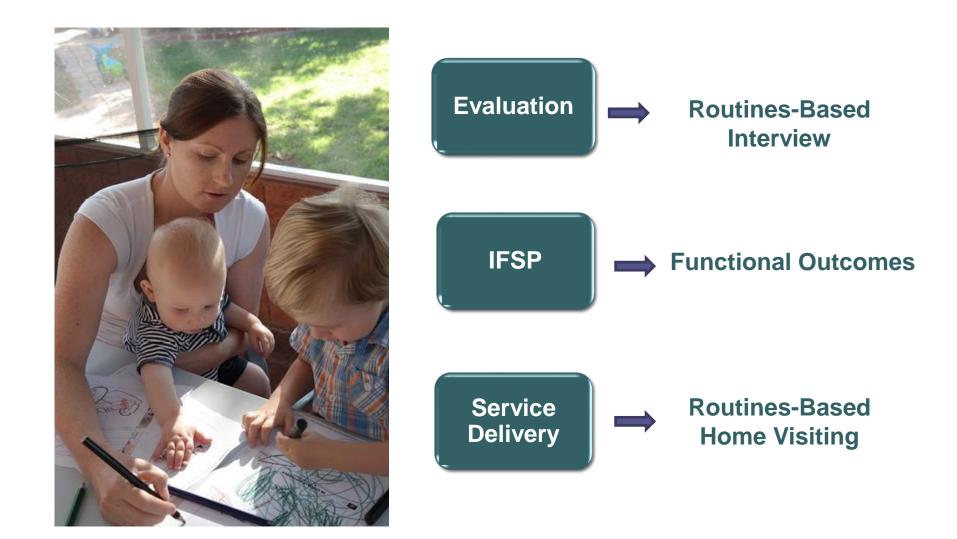




# IMPLEMENTATION OF EVIDENCE BASED PRACTICE



#### Family Engagement is key at each stage of the process



# Routines-Based Interview Conducted by Service Coordinators

#### Fall 2018:

2 Service Coordinators achieved fidelity

#### Summer 2019:

- 7 Service Coordinators achieved fidelity
- 10 did not achieve fidelity
- 1:1 coaching was provided to identify strengths and improvement strategies

#### Going forward

 Providing individualized coaching and TA to 10 Service Coordinators to help them achieve fidelity of practice

# Bright Beginnings PD for Providers focuses on the following South Dakota Birth to Three Priorities







Enhancing Family Engagement

Routines-Based Home Visits Promoting
Parents'
competence,
confidence,
and
effectiveness



# Enhancing Child Outcomes through Family Engagement!

30

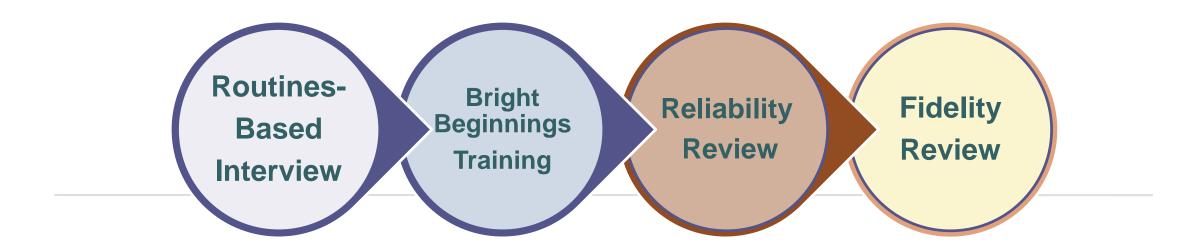
4,200

## JORDAN MOUNGA

ICC Member / Parent



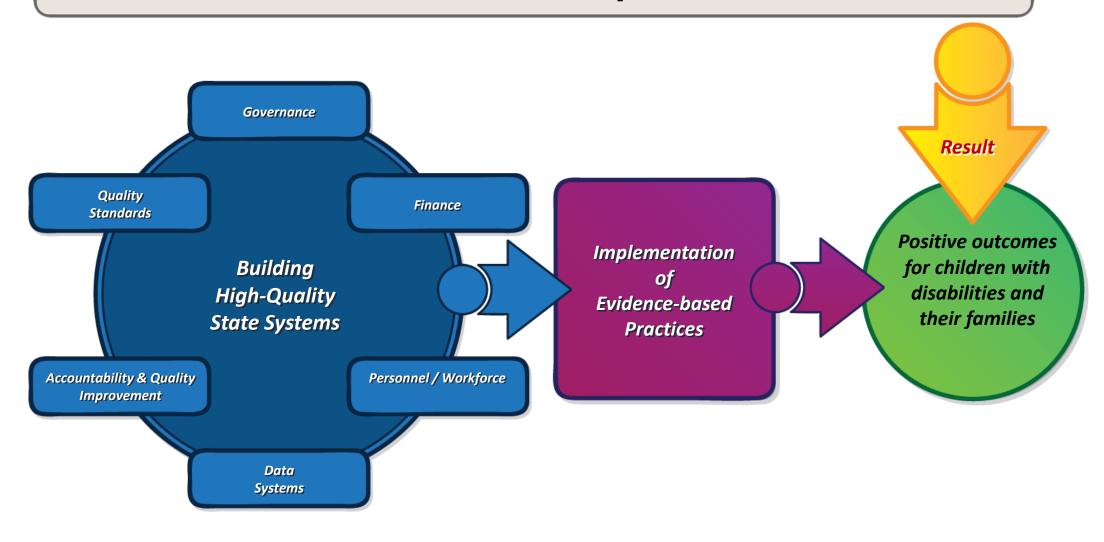
#### **BRIGHT BEGINNINGS PD OVERVIEW**



## Bright Beginnings Professional Development Implementation to date

- Early Adopters (2017) ... 6 recognized Bright Beginnings Providers
- Pilot (2017) ... 15 recognized Bright Beginnings Providers
- Cohort 2 (2018) ... 20 recognized Bright Beginnings Providers
- Cohort 3 (2019) ... 22 recognized Bright Beginnings Providers
- Cohort 4 (2019) ... 22 school district / coop providers began training
   August 5<sup>th</sup>
- Cohort 5 (2020).....Open for Private Provider
- Cohort 6 (2020)......Open for School District / Coop Providers

## What infrastructure must be in place to support implementation of effective evidence-based practices?







#### Federal Grant

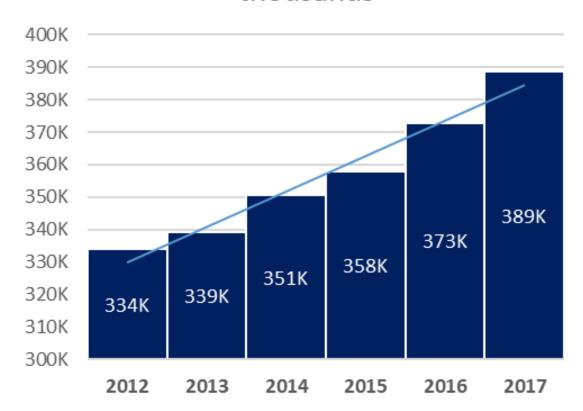
State Maintenance of Effort

Medicaid (Federal and State MOE)

Private Insurance

## C Child Count Trends – US and Outlying Areas

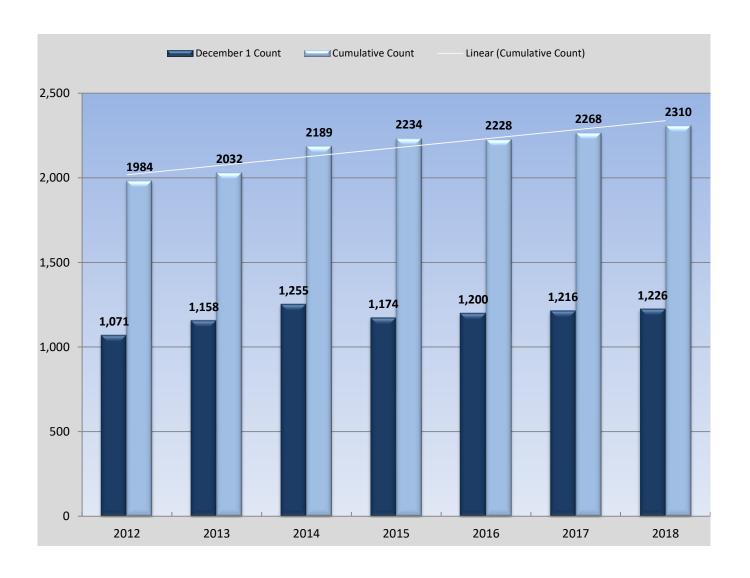
Ages Birth Through 2, Total, in thousands

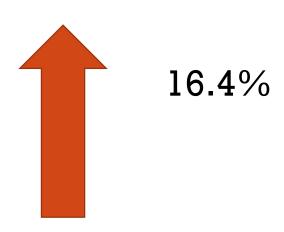




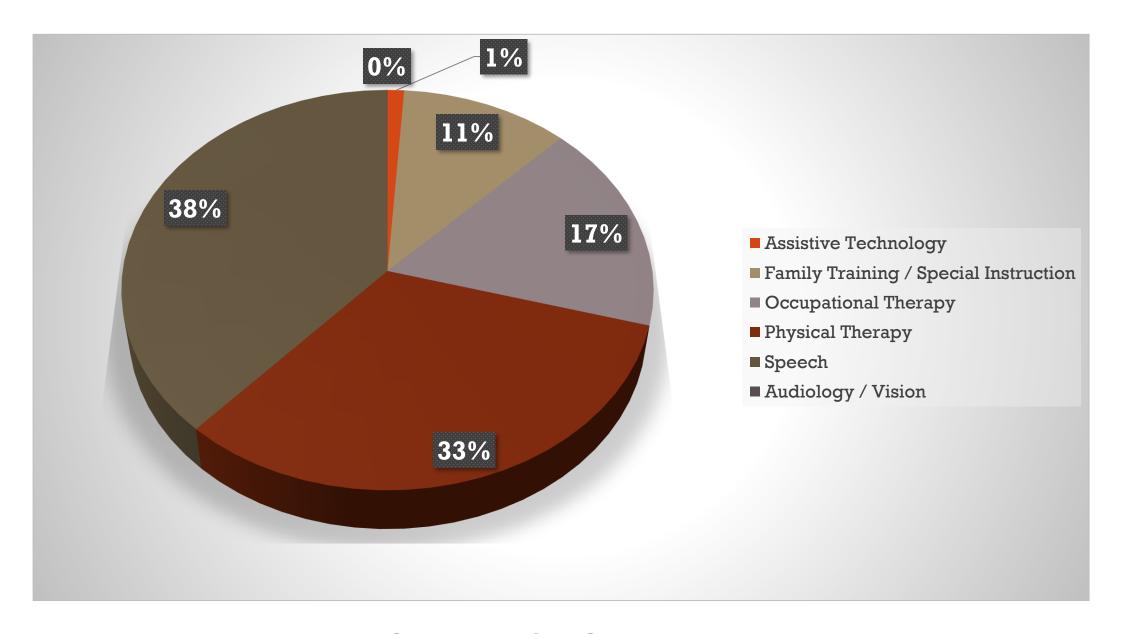


#### SD PART C CHILD COUNT



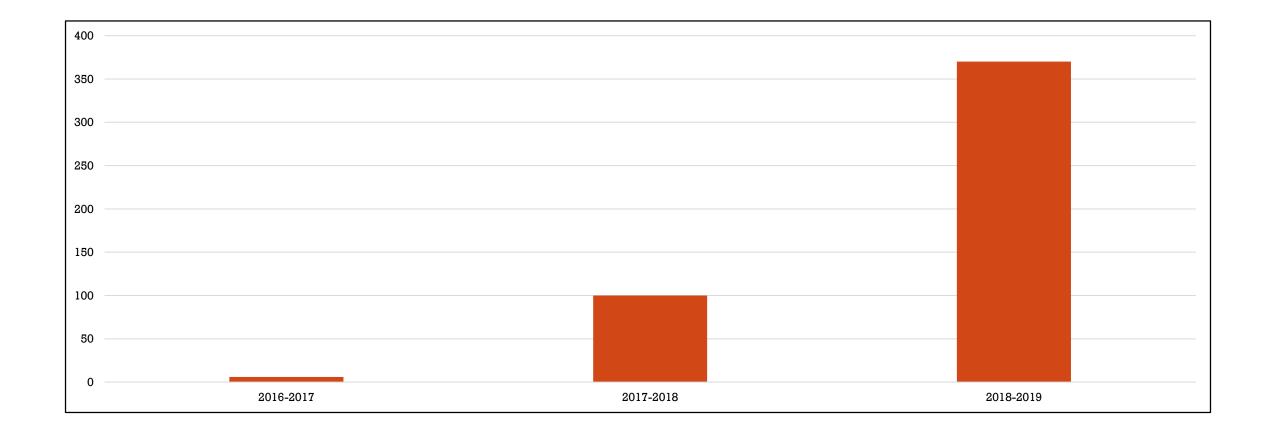






### **SERVICES DATA**





## TELE-THERAPY



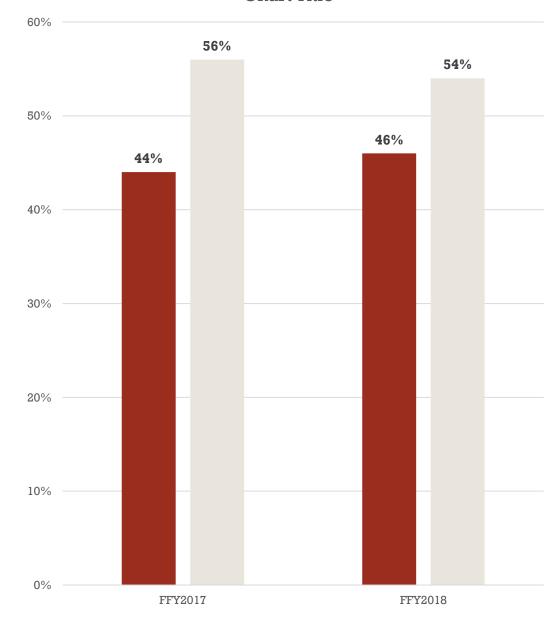


# SD PART C EXITING

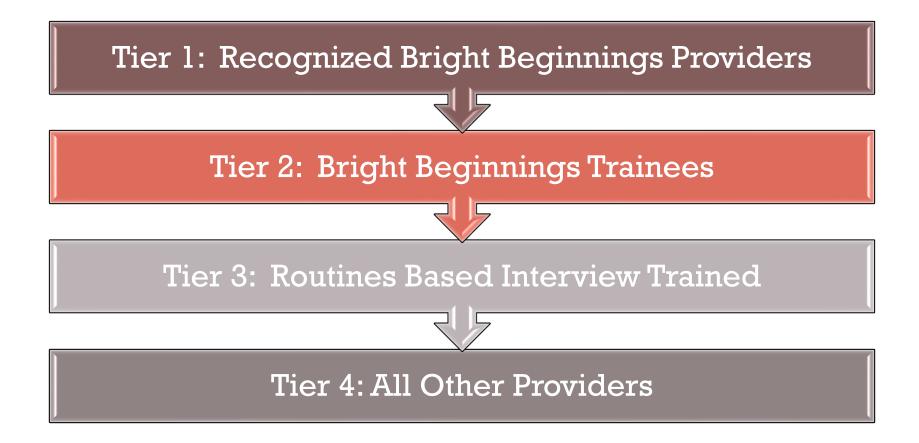




#### Chart Title

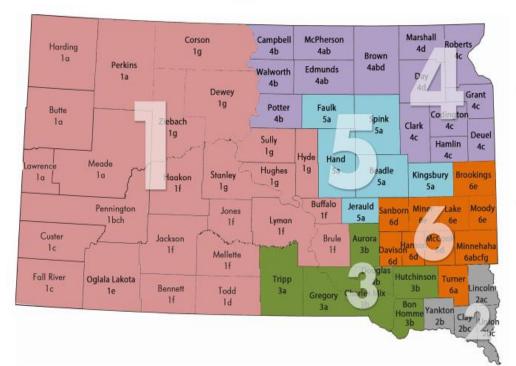


## TIERED RECOGNITION OF SD BIRTH TO THREE DIRECT SERVICE PROVIDERS









#### Birth to Three Program

1.800.305.3064

www.doe.sd.gov /Birthto3/

#### 1. Black Hills Birth to Three

h. Jen Nelson

Referrals- bhbirthtothree@bhssc.org

a. Crystal Eaton b. Jordan Graham c&d Jennifer Biggers e. Jen Nelson f. Tricia Amiotte g. Rebecca Poelstra 605.347.4467 605.721.7440 605.721.7458 605.381.1117 605.690.9584

605.721.7458

#### 2. Southeast Birth to Three

605.763.5096

a. Missy Wartenbee 605.300.0025 b. Holly Neth 605.310.7451 c. Lisa Kolb 605.496.2647

#### 3. CORE Birth to Three

605.337.3178 Referrals Fax

#### Hub Area Birth to Three 888.829.0052

605.337.3178

605.337.3180

a. Kristi Kumpf-Roberts
b. Kelsey Shoultz
c. Kelly Bradberry
d. Kristi Kumpf-Roberts
605.622.5750
605.753.5450
605.622-5992

#### 5. Heartland Hands Birth to Three

a. Rich Jankord 605.472.4218

#### 6. Center for Disabilities Birth to Three

(605) 357-1420 or 1-800-658-3080

 a. Bridget Amundson
 605.357.1420

 b. Mary Fitzpatrick
 605.357.1420

 c. Nicole Saue
 605.357.1420

 d. Shannon Nelson
 605.202-0100

 e. Stephanie Krusemark
 605.202.0697

 f. Amanda O'Neill
 605.357.1420

 g. Jamie Butter
 605.357.1420

#### Service Coordination



### **PARTNERSHIPS**

#### South Dakota Developmental Disabilities Grant

- Black Hills Special Services
- 2 Bright Beginnings Cohorts

#### South Dakota Family Engagement Grant

- Birth to 5 focus
- Early Language and Literacy





#### WE ALWAYS FOCUS ON THE MAIN THING



Infants and Toddlers and their Families

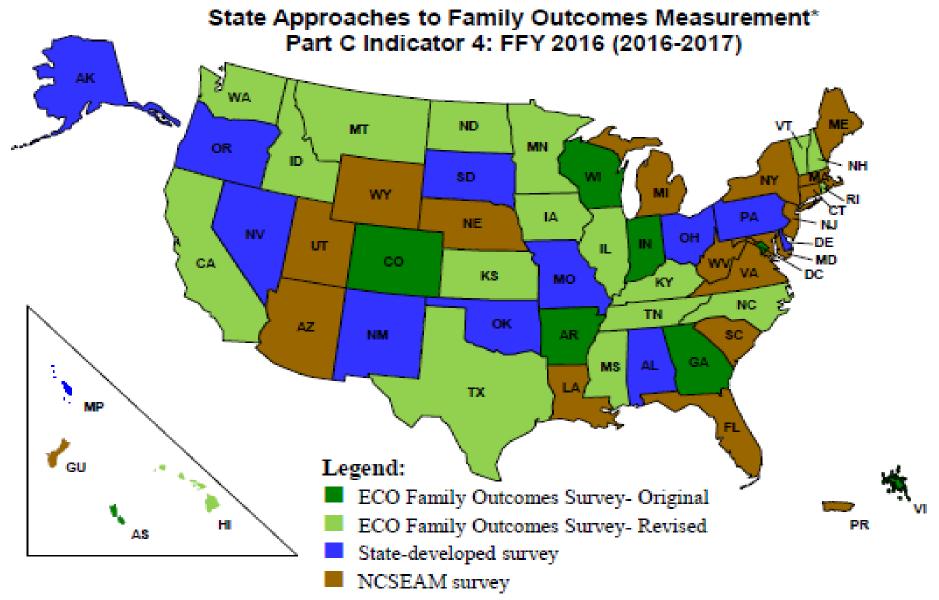


## BREAK TIME





- OSEP has asked for input on the Family Outcome Indicator (C4)
- It appears OSEP is considering making changes to this indicator
- When was last time we took an in depth look at this?



<sup>&</sup>quot;This map shows the approaches used to measure the three family outcomes for APR reporting on indicator C4. Some states used additional tools/ approaches to measure other family variables.

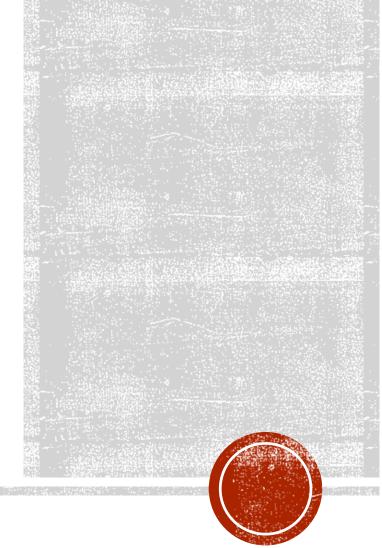


## DISCUSSION QUESTIONS

- Should SD Part C consider changing the survey tool that is used for Indicator C4?
  - If so, what is your initial reaction to the other tools we've shared?
  - Or should we consider revising our own survey?
- 2. Should SD Part C consider making any changes to how the survey is distributed and responses collected?
  - i.e. Web based



## 



# THANK YOU FOR ATTINDING

